PAGE 1 / 19

Image# 202206209517738538

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other Tha	n An Authorized	d Committee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT	=/10	ample: If typing, type or the lines.	12FE4M	5
WOMEN SPEAK O	UT PAC				
1					
	1 0770 C. Aulia est	an Mill Dr			
ADDRESS (number and stree	•	ON MIIII Dr.			
Check if different than previously	PO Box 803 Arlington			ı VA ı	22206
reported. (ACC)					
2. FEC IDENTIFICATION	NUMBER ▼	CITY ▲		STATE ▲	ZIP CODE ▲
C C00530766		3. IS THIS REPORT	x NEW (N)	OR AM	MENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)			20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:		Apr 20 (M4)			(Non-Election Year Only) 20 (M10) Jan 31 (YE)
April 15 Quarterly Repo	ort (Q1)				
July 15 Quarterly Repo	ort (Q2) (C) 12-D	-Election	Primary (12P)	General	
October 15 Quarterly Repo		ort for the:	Convention (12C)	Special (125)
January 31 Year-End Repo	ort (YE)	Election on	M M / D D	/	in the State of
July 31 Mid-Ye Report (Non-el Year Only) (M	ection (d) S0-D POS	Pay ST-Election ort for the:	General (30G)	Runoff (3	Special (30S)
Termination Re (TER)	port	Election on	M = M / D = D	/	in the State of
5. Covering Period	05 01 01	2022	through C	/5 31 /	2022
I certify that I have examine			wledge and belief it	is true, correct and	d complete.
Type or Print Name of Trea	Gross, Jennife surer	PF, , ,			
Signature of Treasurer	Gross, Jennifer, , ,		[Electronically Filed]	Date 06	19 / 2022
NOTE: Submission of false, e	erroneous, or incomple	te information may su	ubject the person sigr	ing this Report to the	ne penalties of 52 U.S.C. § 3010
Office Use					FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

	FEC Form 3X (Rev. 05/2016)	OF RECEIPTS AND DISBURSEMENTS	Page 2
V	Vrite or Type Committee Name		
\	WOMEN SPEAK OUT PAC		
R	Report Covering the Period: From:	05 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2022		546135.12
	(b) Cash on Hand at Beginning of Reporting Period	. 2702108.54	
	(c) Total Receipts (from Line 19)	. 220342.00	2390358.53
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	. 2922450.54	2936493.65
7.	Total Disbursements (from Line 31)	253276.73	267319.84
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	. 2669173.81	2669173.81
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	. 167308.68	
	This committee has qualified as a mul	lticandidate committee. (see FEC FORM 1M)	
		For further information contact:	
		Federal Election Commission 999 E Street, NW Washington, DC 20463	
		Toll Free 800-424-9530 Local 202-694-1100	

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

WOMEN SPEAK OUT PAC

Report Covering the Period: From: 05 01 2022 To: 05 31 2022					
I. Receipts	I. Receipts COLUMN A Total This Period				
` '					
(i) Itemized (use Schedule A)	1250.00	1512983.89			
(ii) Unitemized(iii) TOTAL (add	203.00	1700.00			
Lines 11(a)(i) and (ii)	1453.00	1514683.89			
	0.00	0.00			
(such as PACs)	218889.00	875556.00			
	220342.00	2390239.89			
Party Committees	0.00	0.00			
All Loans Received	0.00	0.00			
Loan Repayments Received	0.00	0.00			
· · · · · · · · · · · · · · · · · · ·	0.00	0.00			
	0.00	0.00			
	0.00	0.00			
Other Federal Receipts	45	4 4			
· · · · · · · · · · · · · · · · · · ·	0.00	118.64			
	,				
	0.00	0.00			
(IIOIII SCHEUUIE FIS)	0.00	0.00			
(b) Levin Funds (from Schedule H5)	0.00	0.00			
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00			
· · · · · · · · · · · · · · · · · · ·	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
	Operating Expenditures:	Iotal Tills Fellou	Calendar rear-to-Date		
	(a) Allocated Federal/Non-Federal Activity (from Schedule H4)				
	(i) Federal Share	0.00	0.00		
	(ii) Non-Federal Share	0.00	0.00		
	(b) Other Federal Operating	1765.05	15808.16		
	Expenditures(c) Total Operating Expenditures	1703.03	13006.10		
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	1765.05	15808.16		
	Transfers to Affiliated/Other Party	1700.00	45		
	Committees	0.00	0.00		
	Contributions to Federal Candidates/Committees	4 4	4 4		
	and Other Political Committees	0.00	0.00		
	Independent Expenditures				
	(use Schedule E)	63966.68	63966.68		
	(52 U.S.C. § 30116(d))	0.00			
	(use Schedule F)	0.00	0.00		
	Loan Repayments Made	0.00	0.00		
-		4 4	0.00		
	Loans Made	0.00	0.00		
	Refunds of Contributions To: (a) Individuals/Persons Other	4 4			
	Than Political Committees	0.00	0.00		
		4 4 4	4 4		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees				
	(such as PACs)	0.00	0.00		
	(d) Total Contribution Refunds				
	(add Lines 28(a), (b), and (c))	0.00	0.00		
	Other Disbursements (Including				
	Non-Federal Donations)	187545.00	187545.00		
	, in the second	4 4			
	Federal Election Activity (52 U.S.C. § 30101(2)	0))			
	(a) Allocated Federal Election Activity				
	(from Schedule H6) (i) Federal Share	0.00			
	(i) Federal Strate	0.00	0.00		
	(ii) "Levin" Share	0.00	0.00		
	(b) Federal Election Activity Paid	4	5.00		
	Entirely With Federal Funds	0.00	0.00		
	(c) Total Federal Election Activity (add				
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
		7 7	7 7		
	Total Disbursements (add Lines 21(c), 22,				
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	253276.73	267319.84		
	Total Fadaval Bishaman	4 4	495 495 455		
	Total Federal Disbursements				
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)				
	110111 LINE 01)	253276.73	267319.84		

34. Total Contribution Refunds

37. Offsets to Operating Expenditures

38. Net Operating Expenditures

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 05/2016) III. Net Contributions/

Operating Expenditures

of Disbursements

Page 5 **COLUMN A** COLUMN B **Total This Period** Calendar Year-to-Date 33. Total Contributions (other than loans) 220342.00 2390239.89 (from Line 11(d), page 3) 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 2390239.89 220342.00 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 1765.05 15808.16 (add Line 21(a)(i) and Line 21(b))▶ 0.00 0.00 (from Line 15, page 3)..... 1765.05 15808.16 (subtract Line 37 from Line 36)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				PAGE	6	OF	19		
(check only one)									
	X	11a		11b		11c	12		
		13		14		15	16	;	17

	nd Statements may not be sold or used by any pe the name and address of any political committee	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle Dobrzenski, Frank, , , Mailing Address 312 Altavista Loop	e Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	05 01 2022 Transaction ID : SA11AI.42887
Jacksonville	NC 28546-8160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer (for Individual) Expedient Resource Services	Occupation (for Individual) Principal	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name of Individual (Last, First, Middle Gilhooley, Kevin, , , Mailing Address 5028 East Atherton Street	· ·	Date of Receipt
-		05 03 2022
City Long Beach	State Zip Code CA 90815-3721	Transaction ID : SA11AI.42890
FEC ID number of contributing federal political committee.	C 30013-3721	Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle	e Initial) or Full Organization Name	Date of Receipt
Mailing Address 809 La Cruz Drive		05 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City El Paso	State Zip Code TX 79902-1720	Transaction ID : SA11AI.42892
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Attorney	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line num	ber only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) **X** 11a 11b 11c

19

7 OF

for each category of the 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Minks, Rachel, , , Date of Receipt Mailing Address 17024 Barium Street Northwest 2022 City Zip Code State Transaction ID: SA11AI.42898 MN Andover 55304-1623 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Capstone Homes Director of Community & Culture Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Montgomery, Janet, , , Date of Receipt Mailing Address P.O. Box 1485 05 2022 City State Zip Code Transaction ID: SA11AI.42900 TX Brookshire 77423-1485 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed Certified Financial Planner Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... 1250.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

lm	age# 202206209517738545				
SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS			Use separate sche for each category of Detailed Summary	dule(s) of the	FOR LINE NUMBER: PAGE 8 OF 19 (check only one) 11a 11b
	ny information copied from such Reports and Star for commercial purposes, other than using the r				
\rangle	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				
Δ.	Full Name of Individual (Last, First, Middle Initial RESTORATION PAC Mailing Address 1901 BUTTERFIELD ROAD STE. 120 City DOWNERS GROVE FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General	State IL Coo	Zip Code 60515 571588 Ipation (for Individual) Year-to-Date ▼		Date of Receipt M M M / 25 / 2022 Transaction ID : SA11C.42883 Amount of Each Receipt this Period 218889.00 Memo Item Contribution
— 3.	Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial Mailing Address	al) or Full O	g- 1 - g- 1	56.00	Date of Receipt
	City FEC ID number of contributing federal political committee.	State	Zip Code	_	Amount of Each Receipt this Period
	rederar ponticar committee.				

S 17

Transaction D: SB218-4290 Amy information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Ancedot, Inc Mailing Address 1340 Poydras Street Suite 1770 City Mailing Address 1900 K Street NW City Washington Defice Sought: House Disbursement Di	SCHEDULE B (FEC Form 3X)	FOR LINE			E NUMBER: PAGE 9 OF 19				
Detailed Summary Page	ITEMIZED DISBURSEMENTS		Use separate schedule(s) (check onl		only one)				
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Ancdot, Inc Mailing Address 1340 Poydras Street Suite 1770 City New Orleans LA 70112 Purpose of Disbursement Category/ Type Date of Disbursement Category/ Type Date of Disbursement Category/ Type Date of Disbursement Disbursement Disbursement Date of Disbursement Category/ Type Date of Disbursement Disbursement Date of Disbursement Date									
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A nedot, Inc Mailing Address 1340 Poydras Street Suite 1770 City New Orleans Candidate Name Office Sought: House Disbursement For: Senate Primary General District: Primary General Disbursement Disburs	Any information conied from such Reports and State	mente may	not be sold or use						
WOMEN SPEAK OUT PAC Full Name (Last, First, Middle Initial) A. Anedot, Inc Mailing Address 1340 Poydras Street Suite 1770 City New Orleans Varietic Card Trocessing Fees Candidate Name City Senate Primary Senate Primary General State: District: Full Name (Last, First, Middle Initial) Denton US LLP Mailing Address 1900 K Street NW City Washington Purpose of Disbursement Legal Fees Candidate Name City City City State: District: Full Name (Last, First, Middle Initial) Denton US LLP Mailing Address 1900 K Street NW City Washington Purpose of Disbursement Legal Fees Candidate Name City Senate Primary General Disbursement Legal Fees Candidate Name City Washington District: Full Name (Last, First, Middle Initial) District: Full Name (Last, First, Middle Initial) City Senate Primary General Disbursement Legal Fees Candidate Name City Senate Primary General Disbursement Legal Fees Candidate Name City Senate Primary General Disbursement District: Full Name (Last, First, Middle Initial) Date of Disbursement City Full Name (Last, First, Middle Initial) Date of Disbursement City Purpose of									
A. Anedot, Inc Mailing Address 1340 Poydras Street Suite 1770 City New Orleans Pirpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: House Senate President District: Full Name (Last, First, Middle Initial) Denton US LLP Mailing Address 1900 K Street NW City Washington Purpose of Disbursement Legal Fees Candidate Name Disbursement Disbursement District: Full Name (Last, First, Middle Initial) Senate President Disbursement Disbursem	1 \								
A Anedot, Inc Mailing Address 1340 Poydras Street Suite 1770 City New Orleans Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) Share Candidate Name Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Share Candidate Name Office Sought: House Disbursement For: Senate President District: Full Name (Last, First, Middle Initial) Share Candidate Name Office Sought: House Disbursement For: Senate Primary General Primary General Primary General Primary General President State: District: Full Name (Last, First, Middle Initial) Share Candidate Name Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement Memo Item FEC Identification Number Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement Date of Disbursement Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement FEC Identification Number Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement FEC Identification Number Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement FEC Identification Number Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement FEC Identification Number Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement FEC Identification Number Category/ Type Amount of Each Disbursement Initial Period Amount of Each Disbursement Initial Period Amount of Each Disbursement Initial Period	WOMEN SPEAK OUT PAC								
Mailing Address 1340 Poydras Street Suite 1770 City State Zip Code New Orleans LA 70112 Purpose of Disbursement Credit Card Processing Fees Candidate Name Ctast, First, Middle Initial) District: Full Name (Last, First, Middle Initial) Office Sought: House Senate Primary General President Legal Fees Candidate Name City State Disbursement For: Senate Primary General President State: District: Full Name (Last, First, Middle Initial) Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Primary General Primary General President Senate President					5				
Mailing Address 1340 Poydras Street Suite 1770 City New Orleans Purpose of Disbursement Credit Card Processing Fees Candidate Name Category/ Office Sought: House Primary General President District: Full Name (Last, First, Middle Initial) Denton US LLP Mailing Address Candidate Name Category/ Type Date of Disbursement Inits Period FEC Identification Number Category/ Type Transaction ID: SB21B.42904 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Date of Disbursement Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement Inits Period FEC Identification Number Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement Inits Period FEC Identification Number Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement Inits Period FEC Identification Number Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement Inits Period FEC Identification Number Category/ Type FEC Identification Number Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement Inits Period FEC Identification Number Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement Inits Period Category/ Type FEC Identification Number Category/ Type Amount of Each Disbursement Inits Period Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement Inits Period Category/ Type Amount of Each Disbursement Inits Period Amount of Each Disbursement Inits Period Category/ Type Amount of Each Disbursement Inits Period Amount of Each Disbursement Inits Period	A. Anedot, Inc				Date of L				_
City New Orleans Purpose of Disbursement Credit Card Processing Fees Candidate Name Category/ Office Sought: House President State: District: Full Name (Last, First, Middle Initial) Senate Purpose of Disbursement Legal Fees Candidate Name Category/ Type Date of Disbursement Category/ Type Date of Disbursement FC Transaction ID: SB218.42904 Amount of Each Disbursement this Period Transaction ID: SB218.42904 Amount of Each Disbursement Type Date of Disbursement Date of Disbursement Date of Disbursement Category/ Type Transaction ID: SB218.42903 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Transaction ID: SB218.42903 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Transaction ID: SB218.42903 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Transaction ID: SB218.42903 Amount of Each Disbursement Category/ Type Transaction ID: SB218.42903 Amount of Each Disbursement Category/ Type Tell Name (Last, First, Middle Initial) Category/ Type Transaction ID: SB218.42903 Amount of Each Disbursement Category/ Type Transaction ID: SB218.42903 Amount of Each Disbursement Category/ Type Tell Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Tell Name (Last, First, Middle Initial) Category/ Type Transaction ID: SB218.42903 Amount of Each Disbursement Category/ Type Transaction ID: SB218.42903 Amount of Each Disbursement Category/ Type Transaction ID: SB218.42903 Amount of Each Disbursement this Period	Mailing Address 1340 Poydras Street				05				
New Orleans Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought:			T						
Purpose of Disbursement Credit Card Processing Fees Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Memo Item Date of Disbursement Full Name (Last, First, Middle Initial) State: Disbursement Legal Fees Candidate Name Office Sought: House Disbursement Legal Fees Candidate Name Dentron US LLP Mailing Address 1900 K Street NW Date of Disbursement Legal Fees Candidate Name Disbursement Disbursement Legal Fees Candidate Name Disbursement For: Senate Primary General Other (specify) Disbursement For: Senate Primary General Other (specify) Date of Disbursement this Period FEC Identification Number Category/ Type Tansaction ID : SB21B.42903 Amount of Each Disbursement this Period Fell Name (Last, First, Middle Initial) Date of Disbursement Eull Name (Last, First, Middle Initial) Date of Disbursement City State Zip Code Purpose of Disbursement Category/ Type Tec Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type Amount of Each Disbursement this Period Amount of Each Disbursement this Period	,		l '		FEC Iden	tification	Number		
Candidate Name Candidate Name Category/ Type Office Sought: House Primary General Primary General District: Full Name (Last, First, Middle Initial) State: District: State: Zip Code DC 20006 Purpose of Disbursement Legal Fees Candidate Name Category/ Type Transaction ID : SB21B.42904 Amount of Each Disbursement this Period Amount of Each Disbursement this Period Transaction ID : SB21B.42904 Amount of Each Disbursement this Period Date of Disbursement Category/ Type Transaction ID : SB21B.42904 Amount of Each Disbursement Date of Disbursement this Period FEC Identification Number Category/ Type Transaction ID : SB21B.42904 Amount of Each Disbursement Date of Disbursement this Period Transaction ID : SB21B.42904 Amount of Each Disbursement Date of Disbursement Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type Amount of Each Disbursement this Period	Purpose of Disbursement		101.12		C				
Office Sought:				L		saction II) : SB21E	3.42904	
Office Sought:	Candidate Name						_		riod
Senate President Other (specify) ▼	Office Sought: House Disburse	ement For:		туре				28.05	\Box
State: District: Full Name (Last, First, Middle Initial) 3. Denton US LLP Mailing Address 1900 K Street NW City Washington Purpose of Disbursement Legal Fees Candidate Name Category/ Office Sought: House Primary General Office Sough: Primary General President Other (specify) State: District: Memo Item FEC Identification Number Category/ Type Type Type Type Category/ Type Type Category/ Type Type Category/ Type Amount of Each Disbursement this Period FEC Identification Number Category/ Type Category/ Type Category/ Type Amount of Each Disbursement this Period Amount of Each Disbursement this Period		Primary	General			7	7	45	_
Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address 1900 K Street NW City Washington Purpose of Disbursement Legal Fees Candidate Name Office Sought: President State: District: Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Date of Disbursement Category/ Type Type Memo Item Date of Disbursement Firmary General Other (specify) Date of Disbursement Date of Disbursement Fill Name (Last, First, Middle Initial) Date of Disbursement Type Type Category/ Type Type Amount of Each Disbursement Category/ Type Category/ Type Amount of Each Disbursement this Period FEC Identification Number Category/ Type Amount of Each Disbursement this Period		Other (spe	ecify) 🔻		Memo	o Item			
Date of Disbursement Mailing Address 1900 K Street NW City Washington Purpose of Disbursement Legal Fees Candidate Name Office Sought: House President State: District: FEC Identification Number Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement this Period Memo Item Date of Disbursement FEC Identification Number Category/ Type To Description Memo Item Date of Disbursement Mailing Address City Purpose of Disbursement Candidate Name Category/ Type Tescident Transaction ID: SB21B.42903 Amount of Each Disbursement this Period Transaction ID: SB21B.42903 Amount of Each Disbursement this Period Transaction ID: SB21B.42903 Amount of Each Disbursement this Period Transaction ID: SB21B.42903 Amount of Each Disbursement this Period Transaction ID: SB21B.42903 Amount of Each Disbursement this Period Transaction ID: SB21B.42903 Amount of Each Disbursement this Period Transaction ID: SB21B.42903 Amount of Each Disbursement this Period Transaction ID: SB21B.42903 Amount of Each Disbursement this Period					_				
Mailing Address 1900 K Street NW City Washington Purpose of Disbursement Legal Fees Candidate Name Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement this Period Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type Fed Identification Number Category/ Type Fec Identification Number Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement this Period Memo Item Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Amount of Each Disbursement this Period Amount of Each Disbursement this Period					Date of D	isbursem	ent		
City Washington Purpose of Disbursement Legal Fees Candidate Name Category/ Type Office Sought: House Senate Primary General President District: FEC Identification Number Category/ Type FEC Identification Number Category/ Memo Item FEC Identification Number Category/ Type Amount of Each Disbursement this Period						M M / D D / Y Y Y			7
Washington Purpose of Disbursement Legal Fees Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement this Period Memo Item FEC Identification Number Category/ Type FEC Identification Number Category/ Type Amount of Each Disbursement this Period Amount of Each Disbursement this Period	Mailing Address 1900 K Street NW				05	06		2022	
Purpose of Disbursement Legal Fees Candidate Name Category/ Type Office Sought: House Senate Primary General President President Other (specify) State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Category/ Type Category/ Type Amount of Each Disbursement this Period FEC Identification Number Category/ Type Amount of Each Disbursement this Period	•				FEC Iden	tification	Number		
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Transaction ID: SB21B.42903 Amount of Each Disbursement this Period Memo Item Date of Disbursement FEC Identification Number Category/ Type Amount of Each Disbursement this Period		ВС	Category/						
Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Memo Item Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Amount of Each Disbursement this Period Memo Item FEC Identification Number Category/ Type Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category/ Type	Legal Fees								
Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item Pate of Disbursement Candidate Name Disbursement For: Senate Primary General Other (specify) Memo Item Pate of Disbursement Category/ Type Amount of Each Disbursement this Period	Candidate Name						_		riod
Senate Primary General Other (specify) Memo Item Full Name (Last, First, Middle Initial) City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Amount of Each Disbursement this Period	Office Sought: House Disburse	ment For		Туре				1680.00	П
State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address City Purpose of Disbursement Candidate Name Category/ Type Memo Item Date of Disbursement FEC Identification Number Category/ Type Amount of Each Disbursement this Period		1	General			7	7	45	
Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address City Purpose of Disbursement Candidate Name Category/ Type Type Date of Disbursement Category/ Type Amount of Each Disbursement this Period		Other (spe	ecify)		Memo	o Item			
Mailing Address City Purpose of Disbursement Candidate Name Category/ Type Date of Disbursement FEC Identification Number Category/ Type Amount of Each Disbursement this Period									
Mailing Address City State Zip Code FEC Identification Number Candidate Name Category/ Type Amount of Each Disbursement this Period	C.				Date of D	isbursem	ent		
City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Amount of Each Disbursement this Period					M M	/ D D	/ Y	YYY	1
Purpose of Disbursement Candidate Name Category/ Type Category/ Type Category/ Type	Mailing Address						J L		_
Candidate Name Category/ Type Category/ Type Amount of Each Disbursement this Period	City	State	Zip Code		FEC Iden	tification	Number		
Candidate Name Category/ Type Amount of Each Disbursement this Period	Purpose of Disbursement				C				
Type Afficiant of Each Disbursement this Period									
	Candidate Name				Amount of Each Disbursement this Period			riod	
Zioda de la Caracteria	Office Sought: House Disburse	ement For:		.,,,,	1				
Senate Primary General						7	7		
State: District: Other (specify) ▼ Memo Item		Other (spe	ecify) 🔻		Mem	o Item			
Oldio. District.	State. District.					-			_
SUBTOTAL of Disbursements This Page (optional)	SUBTOTAL of Disbursements This Page (optional).					75	-	1708.05	
TOTAL This Period (last page this line number only)	TOTAL This Built of August 1997	۸.			-			1708.05	\neg

17

SCHEDULE B (FEC Form 3X)	lles somewate establish	FOR LINE	NUMBER:	PAGE 10 OF 19	
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orlook orm)			
	Detailed Summary Page	21b 28a	22 23 28c x	26 27 29 30b	
Any information copied from such Reports and Statem	l nents may not be sold or u	sed by any pers			
or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)					
WOMEN SPEAK OUT PAC					
Full Name (Last, First, Middle Initial)					
A. FlexPoint Media Inc.			Date of Disburseme		
Mailing Address PO Box 1051			05 02	2022	
,	State Zip Code		FEC Identification N	umber	
New Albany Purpose of Disbursement	OH 43054				
Media Placement and Production-Georgia (Non-Fed	deral)		C Transaction ID	- SB20 42040	
Candidate Name		Category/	Transaction ID Amount of Each Dis	bursement this Period	
Office Sought: House Disbursem	nent For: 2022	Туре		150660.00	
	Primary General		4	7 7	
	Other (specify) ▼		Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) B. Targeted Creative Communications	e Inc		Date of Disburseme	nt	
Targeted Greative Communications	5, 1110.		M M / D D	/ Y Y Y Y Y	
Mailing Address 106 South Columbus St			05 02	2022	
•	State Zip Code VA 22314		FEC Identification N	umber	
Purpose of Disbursement	22314		C		
Direct Mail-Georgia (Non-Federal)			Transaction ID	: SB29.42914	
Candidate Name	Category/ Type		Amount of Each Dis	bursement this Period	
Office Sought: House Disbursem	nent For: 2022	Туре		24435.00	
Senate	Primary x General		4-11	4- 1 4-	
State: District:	Other (specify)		Memo Item		
Full Name (Last, First, Middle Initial)					
C. Targeted Creative Communications	s, Inc.		Date of Disburseme	nt	
Mailing Address 100 C at C t t C			M M / D D	7 7 7 7 7 7	
Mailing Address 106 South Columbus St			05 13	2022	
,	State Zip Code		FEC Identification N	umber	
Alexandria Purpose of Disbursement	VA 22314		C		
Direct Mail-Georgia (Non-Federal)			Transaction ID	· SB20 /2012	
Candidate Name		Category/		bursement this Period	
Office Sought: House Disbursem	nent For: 2022	Туре		12450.00	
	nent For: 2022 Primary 🗶 General			.2.00.00	
	Other (specify) ▼		Memo Item		
State: District:					
SUBTOTAL of Disbursements This Page (optional)				187545.00	
SOBTOTAL OF DISDUISEMENTS THIS Page (optional)		·····	7	7 7	
TOTAL This Period (last page this line number only).			1	187545.00	

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 11 OF 19

FOR LINE 13 OF FORM 3X NAME OF COMMITTEE (In Full) Transaction ID: SC/10.9700 WOMEN SPEAK OUT PAC Election: **LOAN SOURCE** Full Name (Last, First, Middle Initial) Susan B Anthony List, Inc. Memo Item Primary General Mailing Address 2776 S. Arlington Mill Dr. Other (specify) ▼ PO Box 803 State City ZIP Code 22206 Arlington VA Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 77452.55 77452.55 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 30 11 2017 11/30/2021 0.00 X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address City State ZIP Code Amount Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation ZIP Code City State Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City ZIP Code State Amount Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)..... 77452.55 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 12 OF 19

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full) Transaction ID: SC/10.13439 WOMEN SPEAK OUT PAC Election: **LOAN SOURCE** Full Name (Last, First, Middle Initial) Susan B Anthony List, Inc. Memo Item Primary General Mailing Address 2776 S. Arlington Mill Dr. Other (specify) ▼ PO Box 803 City State ZIP Code 22206 Arlington VA Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10118.58 10118.58 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 30 11 2018 11/30/2022 0.00 X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Occupation Mailing Address City State ZIP Code Amount Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation ZIP Code City State Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City ZIP Code State Amount Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)..... 10118.58 TOTALS This Period (last page in this line only)..... 87571.13 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 13 (FOR LINE NUMBER: (check only one)

	9
X	10

OF

19

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Fees Denton US LLP Mailing Address 1900 K Street NW State Zip Code Washington DC 20006 Transaction ID: SD10.39259 Outstanding Balance Beginning This Period 18996.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1680.00 17316.50 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Estimate digital ads Media Bridge Mailing Address 11300 Astarita Ave City State Zip Code Partlow 22534 Outstanding Balance Beginning This Period Transaction ID: SD10.15740 2000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 2000.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Existing Loan owed to SBA Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4157 10500.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 10500.00 29816.50 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

9 **X** 10

19

14 OF

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Loan for FEC Reporting Services Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington VΑ 22206 Transaction ID: SD10.4110 Outstanding Balance Beginning This Period 5000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 5000.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailings Expense Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.4318 5204.43 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 5204.43 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original transactions put on SBA CC Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.6625 8610.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 8610.00 18814.43 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

9 **X** 10

19

15 OF

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Expense put on SBA CC Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington VΑ 22206 Transaction ID: SD10.6756 Outstanding Balance Beginning This Period 4709.73 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4709.73 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): To post Thrifty Car Rental Expense put on Susan B Anthony List, Inc. SBA Card Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.9222 1894.83 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1894.83 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal - Supplies Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.15960 200.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 200.00 6804.56 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 16 FOR LINE NUMBER: (check only one)

	9
X	10

19

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal - Travel Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington VΑ 22206 Transaction ID: SD10.15958 Outstanding Balance Beginning This Period 27.90 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 27.90 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Salary / Contractor Pay Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.39334 4324.16 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4324.16 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Fees Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.41208 4950.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 4950.00 9302.06 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Amount Incurred This Period

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 17 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

19

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailer Production- Tradewinds See Schedule Susan B Anthony List, Inc. Mailing Address 2776 S. Arlington Mill Dr. PO Box 803 City State Zip Code Arlington VA 22206 Transaction ID: SD10.41901 Outstanding Balance Beginning This Period 15000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 15000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Direct Mail Targeted Creative Communications, Inc. Mailing Address 106 South Columbus St State City Zip Code Alexandria ۷A 22314 Outstanding Balance Beginning This Period Transaction ID: SD10.42878 24435.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 24435.00 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period

1)	SUBTOTALS This Period This Page (optional)	15000.00
2)	TOTALS This Period (last page this line number only)	79737.55
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)	87571.13
4)	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	167308.68

Payment This Period

Outstanding Balance at Close of This Period

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 18 OF 19		
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼		
WOMEN SPEAK OUT PAC				C C00530766		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y		
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination		
Campaign HQ				05 / 14 / 2022		
Mailing Address 109 West Front Street			Amo	punt		
City	State	Zip Code		36581.04		
Brooklyn	IA	52211		Transaction ID : SE.42844 Date of Disbursement or Obligation		
Purpose of Expenditure Phone Calls-Actual (Estimate of \$43,000 reported 5	/15/22)	Category/ Type 004		05 / 17 / 2022		
Name of Federal Candidate:		✗ Support	Office Sou	ight: House District: 00		
BARNETTE, KATHY, , ,		Oppose	l	sident Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	49459.76	Disbursem 2022	ent For: x Primary General Other (specify) ▶		
Full Name of Payee		Memo	Item Date	e of Public Distribution/Dissemination		
Campaign HQ				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 109 West Front Street				05 15 2022		
103 West Fisht Sheet			Amo	ount		
City	State	Zip Code		8145.00		
Brooklyn	IA	52211		ensaction ID : SE.42848 e of Disbursement or Obligation		
Purpose of Expenditure Texts-Actual (Estimate of \$8,000 reported 5/16/22))	Category/ Type 004		05 17 2022		
Name of Federal Candidate:		✗ Support	Office Sou	ight: House District:00		
BARNETTE, KATHY, , ,	Oppose			sident Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought	7	57604.76	Disbursem 2022	ent For: Primary General Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures	;		· • []	44726.04		
(b) SUBTOTAL of Unitemized Independent Expenditu	res					
(c) TOTAL Independent Expenditures			•			
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized					
Gross, Jennifer, , ,	[Electronically Fil	led1	M = M	/ D D / Y Y Y Y		
Signature	_г длеси описшиу Г Ш	_ Date	e 06	19 2022		

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 19 OF 19 FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼	
WOMEN SPEAK OUT PAC				C C00530766	
Check if 24-hour report 48-hour report	New repo	ort Amends repo		"M / D "D / Y "Y "Y "Y	
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination	
Campaign HQ				05 16 2022	
Mailing Address 109 West Front Street			Amou	nt	
City	State	Zip Code	— Г:	6361.92	
Brooklyn	IA	52211		Transaction ID : SE.42852 Date of Disbursement or Obligation	
Purpose of Expenditure Phone Calls-Actual (Estimate of \$16,000 reported 5	Category/ Type 004	05 / 17 / 2022			
Name of Federal Candidate:		✗ Support	Office Sough	t: House District:00	
BARNETTE, KATHY, , ,		Oppose	Preside	 	
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	63966.68	Disbursemen 2022 O	t For: x Primary General ther (specify) ▶	
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination	
Right Line Communications LLC			M	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 763 Dunham St			Amour	nt	
0.1	10	7: 0 1			
City Charleston	State	Zip Code	Trans	12878.72 saction ID : SE.42840	
	SC	29492		of Disbursement or Obligation	
Purpose of Expenditure Texting -Actual (Estimate of \$21,000 Reported 5/1-	Category/ Type 004	004 05 / 17 / 2022			
Name of Federal Candidate:		x Support	Office Sough	t: House District:00	
BARNETTE, KATHY, , ,	Oppose	Oppose President X Senate St			
Calendar Year-To-Date Per Election for Office Sought		12878.72	Disbursemen 2022	t For: 🗶 Primary General	
Per Election for Office Sought	T - T -		0	ther (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	·		· [19240.64	
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•		
(c) TOTAL Independent Expenditures			•	63966.68	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized				
Gross, Jennifer, , ,	[Electronically File	ed]	M M /	19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature		Date	9 06	19 2022	